**FEC** 

## **STATEMENT OF**

FORM 1	ORGANIZA	TION		
i Oitiwi i	(See instructions	s)		Office use only
1. NAME OF COMMITTEE (in	full) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
BOB BRADY	FOR CONGRESS			
ADDRESS (number and	street) 12518 Chilton Road			
(Check if address is changed)	s			
	Philadelphia		LPA L	19154   -
	C	CITY	STATE	ZIP CODE 🛦
COMMITTEE'S E-MA	IL ADDRESS (Please provide only one e-ma			
(Check if address is changed)	s Ifarinella1421@hotmai	il.com		
COMMITTEE'S WED	PAGE ADDRESS (URL)			
	http://bobbrady.us			
(Check if address is changed)	s <u>                                    </u>			
O.5				
3. FEC IDENTIFICA	ATION NUMBER C	C00333740		
4. IS THIS STATEM	MENT NEW (N) OR	X AMENDED (A)		
I certify that I have exam	ined this Statement and to the best of my knowle	edge and belief it is true, correct a	nd complete	
	Lauia I Farinalla			
Type or Print Name of	Treasurer Louis J Farmella			
Signature of Treasure	Electronically Filed by Louis J Fari	inella	Date 07	17 / 2009
NOTE: Submission of fa	alse, erroneous, or incomplete information may s		•	
Office	<del></del>	For further information		
Use Only		Federal Election Commis Toll Free 800-424-9530	ssion	FEC FORM 1 (Revised 02/2009)